


 2662
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AMENDMENT TRANSMITTAL FORM

 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

 Customer No.: 23696
 Attorney Docket No.: 020162
 In Re Application of: Dhinakar Radhakrishnan
 Serial Number: 10/076,831
 Filed: February 14, 2002
 Examiner: David Odland
 Group Art Unit: 2662

RECEIVED

OCT 21 2003

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application. Technology Center 2600

| CLAIMS | (a) Number Remaining After Amendment | (b) Highest Number Previously Paid For | (c) Extra Claims | Large Entity Fee | Fee Paid |
|---|--------------------------------------|--|------------------|--|----------|
| Total* | 49 | 41 | 8 | x \$18 = | \$144 |
| Independent** | 3 | 3 | 0 | x \$86 = | \$0 |
| Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | \$290 | \$ |
| EXTENSION FEES | | | | <input type="checkbox"/> One Month | \$110 |
| | | | | <input type="checkbox"/> Two Months | \$420 |
| | | | | <input checked="" type="checkbox"/> Three Months | \$950 |
| TERMINAL DISCLAIMER | | | | \$110 | \$ |
| | | | | TOTAL FEE | \$1094 |

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$_____.
 The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: October 8, 2003

Signature:

 Albert J. Harnois, Jr.
 Reg. No. 46,123

 QUALCOMM Incorporated
 Attn: Patent Department
 5775 Morehouse Drive
 San Diego, California 92121-1714
 Telephone: (858) 658-5787
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CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

- ☒ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

 Depositor's Name: Courtney Etnyre
 (type or print name)

Date: October 8, 2003

FACSIMILE

- ☐ transmitted by facsimile to the Patent and Trademark Office.

 Depositor's Name: _____
 (type or print name)

Signature: _____